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**DECLARATION FOR UTILITY OR
DESIGN
PATENT APPLICATION
(37 CFR 1.63)**

☐ Declaration Submitted with Initial Filing OR ☒ Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number P001
First Named Inventor Susan Y. Davis

COMPLETE IF KNOWN

Application Number 10/281,286
Filing Date 10/25/2002
Art Unit 3611
Examiner Name Unknown

As the below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Combination Calendar, Count-Down Chart and Growth Chart

(Title of the Invention)

the specification of which

☐ is attached hereto

OR

☒ was filed on (MM/DD/YYYY)

10/25/2002

as United States Application Number or PCT International

Application Number

10/281,286

and was amended on (MM/DD/YYYY)

(if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

DECLARATION — Utility or Design Patent Application

Direct all correspondence to: ☐ Customer Number OR ☒ Correspondence address below

Susan Y. Davis

Name

13215 C8 SE Mill Plain Blvd.

Address

#150

Vancouver

City

WA

State

98684

ZIP

USA

Country

888-376-0095

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:

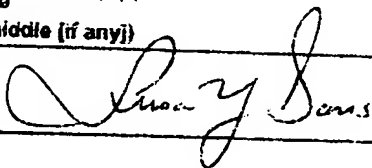
☐ A petition has been filed for this unsigned inventor

Given Name Susan Y.

(first and middle (if any))

Family Name Davis
or Surname

Inventor's
Signature



01/20/2003

Date

Amboy

Residence: City

WA

State

USA

Country

USA

Citizenship

13215 C8 SE Mill Plain Blvd.

Mailing Address

#150

Vancouver

City

WA

State

98684

ZIP

USA

Country

NAME OF SECOND INVENTOR:

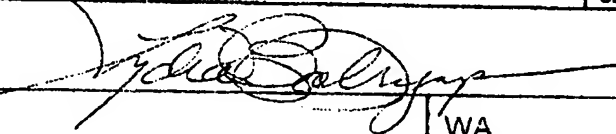
☐ A petition has been filed for this unsigned inventor

Given Name Lydia B.

(first and middle (if any))

Family Name Dalrymple
or Surname

Inventor's
Signature



01/20/2003

Date

Amboy

Residence: City

WA

State

USA

Country

USA

Citizenship

13215 C8 SE Mill Plain Blvd.

Mailing Address

#150

Vancouver

City

WA

State

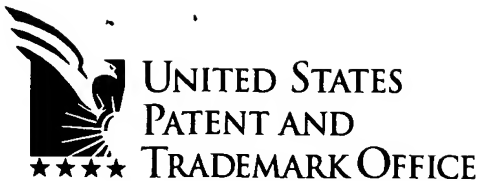
98684

ZIP

USA

Country

☐ Additional inventors are being named on the _____ supplemental Additional inventor(s) sheet(s) PTO/SB/02A attached hereto.



JUNE 04, 2003

PTAS

Under Secretary of Commerce For Intellectual Property and
Director of the United States Patent and Trademark Office
Washington, DC 20231
www.uspto.gov

SUSAN Y. DAVIS
13215 C8 SE MILL PLAIN BLVD.
#150
VANCOUVER, WA 98684



102353411A

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RECORDATION DATE: 01/28/2003

REEL/FRAME: 013702/0225
NUMBER OF PAGES: 2

BRIEF: ASSIGNMENT OF ASSIGNOR'S INTEREST (SEE DOCUMENT FOR DETAILS).

ASSIGNOR:

DALRYMPLE, LYDIA B.

DOC DATE: 01/20/2003

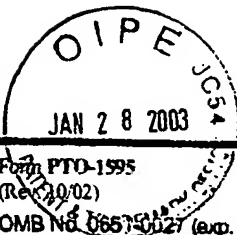
ASSIGNEE:

DAVIS, SUSAN Y.
13215 C8 SE MILL PLAIN BLVD.
#150
VANCOUVER, WASHINGTON 98684

SERIAL NUMBER: 10281286
PATENT NUMBER:

FILING DATE: 10/25/2002
ISSUE DATE:

TONYA LEE, EXAMINER
ASSIGNMENT DIVISION
OFFICE OF PUBLIC RECORDS



1-28-03

01-31-2003

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OMB No. 0657-0027 (exp. 6/30/2005)

PATENTS OF



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102353411

To the Honorable Commissioner of Patents and Trademarks: Please record the attached original documents or copy thereof.

1. Name of conveying party(ies):

Lydia B. Dalrymple

2. Name and address of receiving party(ies)

Name: Susan Y. Davis

Internal Address: #150

Additional name(s) of conveying party(ies) attached? ☐ Yes ☒ No

3. Nature of conveyance:

☒ Assignment

☐ Merger

☐ Security Agreement

☐ Change of Name

☐ Other

Street Address: 13215 C8 SE Mill
Plain Blvd.

City: Vancouver State: WA Zip: 98684

Execution Date:

1/20/03

Additional name(s) & address(es) attached? ☐ Yes ☒ No

4. Application number(s) or patent number(s):

If this document is being filed together with a new application, the execution date of the application is: 1

A. Patent Application No.(s) 10/281,286

B. Patent No.(s)

Additional numbers attached? ☐ Yes ☒ No

5. Name and address of party to whom correspondence concerning document should be mailed:

Name: Susan Y. Davis

Internal Address: #150

6. Total number of applications and patents involved: 1

7. Total fee (37 CFR 3.41).....\$ 40

☒ Enclosed

☐ Authorized to be charged to deposit account

Street Address: 13215 C8 SE Mill

Plain Blvd.

City: Vancouver State: WA Zip: 98684

8. Deposit account number:

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9. Statement and signature.

To the best of my knowledge and belief, the foregoing information is true and correct and any attached copy is a true copy of the original document.

Susan Y. Davis

Name of Person Signing

Signature

1/21/03

Date

Total number of pages including cover sheet, attachments, and documents: 2

Mail documents to be recorded with required cover sheet information to:
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01/29/2003 KATZUNES 00000035 10281285

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ASSIGNMENT OF APPLICATION

Docket Number (Optional)

0001

Whereas, I/We, Lydia B. Dalrymple of Amboy, WA, hereafter referred to as applicant, have invented certain new and useful improvements in

Combination Calendar, Count-Down Chart and Growth Chart

☒ for which an application for a United States Patent was filed on 10/25/2002
Application Number 10,281,286

☐ for which an application for a United States Patent was executed on _____, and

Whereas, Susan Y. Davis of Amboy, WA herein referred to "assignee" whose mailing address is 13215 C8 SE Mill Plain Blvd. #150 is Vancouver WA 98684 desirous of acquiring the entire right, title and interest in the same;

Now, therefore, in consideration of the sum of ONE dollars (\$1.00), the receipt whereof is acknowledged, and other good and valuable consideration, I/We, the applicant(s), by these presents do sell, assign and transfer unto said assignee the full and exclusive right to the said invention in the United States and the entire right, title and interest in and to any and all Patents which may be granted therefor in the United States, I/We hereby authorize and request the Commissioner of Patent and Trademarks to issue said United States Patent to said assignee, of the entire right, title, and interest in and to the same, for his sole use and behoof; and for the use and behoof of his legal representatives, to the full end of the term for which said Patent may be granted, as fully and entirely as the same would have been held by me had this assignment and sale not been made.

Executed this 20th day of January, 2003
at Amboy, WA

State of _____

County of _____

SS:

Before me personally appeared said _____

and acknowledged the foregoing instrument to be his free act and deed this _____

day of _____, 20____.

Seal

(Notary Public)

Note: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. See below*.

* ☐ Total of _____ forms are submitted.

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APR-02-2004 16:14 APPLE		1 408 974 5436 P.01							
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<p>TRANSMITTAL FORM (to be used for all correspondence other than legal)</p>		<p>Application Number: 19281.256 Filing Date: October 25, 2002 First Named Inventor: Susan Y. Davis Art Unit: 3611 Examiner Name: Candace Hope Davis Attorney Docket Number: 2201</p>							
<p>Total Number of Pages in This Submission: _____</p>									
<p>ENCLOSURES (Check all that apply)</p> <table border="0"> <tr> <td> <input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 </td> <td> <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Request for Continued Examination <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Return <input type="checkbox"/> CD, Number of CD(s) </td> <td> <input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): </td> </tr> </table>				<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Request for Continued Examination <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Return <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):			
<input checked="" type="checkbox"/> Fee Transmittal Form <input checked="" type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavit(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Request for Continued Examination <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Return <input type="checkbox"/> CD, Number of CD(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):							
<p>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</p> <table border="0"> <tr> <td>Firm or Individual name</td> <td>Susan Y. Davis</td> </tr> <tr> <td>Signature</td> <td><i>Susan Y. Davis</i></td> </tr> <tr> <td>Date</td> <td>April 2, 2004</td> </tr> </table>				Firm or Individual name	Susan Y. Davis	Signature	<i>Susan Y. Davis</i>	Date	April 2, 2004
Firm or Individual name	Susan Y. Davis								
Signature	<i>Susan Y. Davis</i>								
Date	April 2, 2004								
<p>CERTIFICATE OF TRANSMISSION/MAILING</p> <p>I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage and return envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.</p> <p style="text-align: center;">Fax #: 703-872-9306</p> <table border="0"> <tr> <td>Typed or printed name</td> <td>Susan Y. Davis</td> </tr> <tr> <td>Signature</td> <td><i>Susan Y. Davis</i></td> </tr> <tr> <td>Date</td> <td>April 2, 2004</td> </tr> </table> <p><small>This section of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to be used by the USPTO in processing an application. Confidentiality of information is not guaranteed. This section is exempted from 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the content of this form or suggestions for reducing this burden should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.</small></p> <p><small>If you need assistance in completing this form, call 1-800-PTO-9199 and select option 2.</small></p>				Typed or printed name	Susan Y. Davis	Signature	<i>Susan Y. Davis</i>	Date	April 2, 2004
Typed or printed name	Susan Y. Davis								
Signature	<i>Susan Y. Davis</i>								
Date	April 2, 2004								
<p>PAGE 1/5 RCVD AT 4/2/2004 7:18:14 PM [Eastern Standard Time] SVR:USPTO-REXRF-10 * DNS:9728308 * CSID:1 408 974 5436 * DURATION (mm:ss):02:16</p>									

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FEE TRANSMITTAL
for FY 2004

Effective 10/01/2003. Patent fees are subject to annual revision.

☒ Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

(\$)**475.00****Complete if Known**

Application Number	10/281,286
Filing Date	10-25-02
First Named Inventor	Susan Y. Davis
Examiner Name	Cassandra Davis
Art Unit	3611
Attorney Docket No.	P001

METHOD OF PAYMENT (check all that apply)
☐ Check ☒ Credit card ☐ Money Order ☐ Other ☐ None
☐ Deposit Account:
 Deposit
Account
Number
Deposit
Account
Name

The Director is authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☒ Credit any overpayments☒ Charge any additional fee(s) or any underpayment of fee(s)☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.**FEE CALCULATION****1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1001 770	2001 385	Utility filing fee	
1002 340	2002 170	Design filing fee	
1003 530	2003 265	Plant filing fee	
1004 770	2004 385	Reissue filing fee	
1005 160	2005 80	Provisional filing fee	
SUBTOTAL (1)			(\$)

2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE

Total Claims	Extra Claims	Fee from below	Fee Paid
Independent Claims	-20** =	X	
Multiple Dependent	-3** =	X	

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
1202 18	2202 9	Claims in excess of 20
1201 86	2201 43	Independent claims in excess of 3
1203 290	2203 145	Multiple dependent claim, if not paid
1204 86	2204 43	** Reissue independent claims over original patent
1205 18	2205 9	** Reissue claims in excess of 20 and over original patent
SUBTOTAL (2)		

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
1051 130	2051 65	Surcharge - late filing fee or oath	
1052 50	2052 25	Surcharge - late provisional filing fee or cover sheet	
1053 130	1053 130	Non-English specification	
1812 2,520	1812 2,520	For filing a request for <i>ex parte</i> reexamination	
1804 920*	1804 920*	Requesting publication of SIR prior to Examiner action	
1805 1,840*	1805 1,840*	Requesting publication of SIR after Examiner action	
1251 110	2251 55	Extension for reply within first month	
1252 420	2252 210	Extension for reply within second month	
1253 950	2253 475	Extension for reply within third month	475
1254 1,480	2254 740	Extension for reply within fourth month	
1255 2,010	2255 1,005	Extension for reply within fifth month	
1401 330	2401 165	Notice of Appeal	
1402 330	2402 165	Filing a brief in support of an appeal	
1403 290	2403 145	Request for oral hearing	
1451 1,510	1451 1,510	Petition to institute a public use proceeding	
1452 110	2452 55	Petition to revive - unavoidable	
1453 1,330	2453 665	Petition to revive - unintentional	
1501 1,330	2501 665	Utility issue fee (or reissue)	
1502 480	2502 240	Design issue fee	
1503 640	2503 320	Plant issue fee	
1460 130	1460 130	Petitions to the Commissioner	
1807 50	1807 50	Processing fee under 37 CFR 1.17(q)	
1806 180	1806 180	Submission of Information Disclosure Stmt	
8021 40	8021 40	Recording each patent assignment per property (times number of properties)	
1809 770	2809 385	Filing a submission after final rejection (37 CFR 1.129(a))	
1810 770	2810 385	For each additional invention to be examined (37 CFR 1.129(b))	
1801 770	2801 385	Request for Continued Examination (RCE)	
1802 900	1802 900	Request for expedited examination of a design application	

Other fee (specify)

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)**475****SUBMITTED BY**Name (Print/Type) **Susan Y. Davis**Registration No.
(Attorney/Agent)

(Complete (if applicable))

Telephone **888-376-0095**

Signature

Susan Y. Davis

Date

4-2-04**WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.**

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.